

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810)

# FEE TRANSMITTAL

## For FY 2007

Complete if Known

☐ Applicant claims small entity status. See 37 CFR 1.27

|                      |                       |
|----------------------|-----------------------|
| Application Number   | 10/637,407            |
| Filing Date          | August 7, 2003        |
| First Named Inventor | Masaki Aoshima        |
| Examiner Name        | Martin J. Angebranndt |
| Unit                 | 1756                  |
| Attorney Docket No.  | 890050.436            |

TOTAL AMOUNT OF PAYMENT (\$)**910**

METHOD OF PAYMENT (check all that apply)

- ☒ Check    ☐ Credit Card    ☐ Money Order    ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account    Deposit Account Number: 19-1090    Deposit Account Name: Seed IP Law Group PLLC  
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
☐ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, **except for the filing fee**  
☐ Charge any additional fee(s) or underpayments    ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

**Warning:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   | _____          |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    | _____          |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     | _____          |

## 2. EXCESS CLAIM FEES

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

| Total Claims                            | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|---|--------------|----------|---------------|---------------------------|
| _____ -20 or HP = _____ X _____ = _____ |              |          |               | Fee (\$)                  |
|   |              |          |               | Fee Paid (\$)             |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims                          | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--|--------------|----------|---------------|
| _____ -3 or HP = _____ X _____ = _____ |              |          |               |

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets       | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------------|--------------|--|----------|---------------|
| _____ -100 = _____ | /50 = _____  | _____ (round up to a whole number) x _____       |          |               |

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination FeePetition for Extension of Time Fee (1 month)

Fees Paid (\$)

**790****120**

## SUBMITTED BY

|                   |   |                                   |                   |           |              |
|-------------------|---|-----------------------------------|-------------------|-----------|--------------|
| Signature         |  | Registration No. (Attorney/Agent) | 45,866            | Telephone | 206-622-4900 |
| Name (Print/Type) | Raymond W. Armentrout   | Date                              | September 6, 2007 |           |              |